

U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number: 08 C 1775

Tony Hillard, Petitioner

v.

Joseph Loftus, Warden, Danville Correctional Center, Respondent

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

Joseph Loftus, Warden, Danville Correctional Center, Respondent

NAME (Type or print)		
Charles Redfern		
SIGNATURE (Use electronic signature if the appearance form is filed electronically)		
s/ Charles Redfern		
FIRM		
Office of the Illinois Attorney General - Criminal Appeals Division		
STREET ADDRESS		
100 W. Randolph, 12 th Floor		
CITY/STATE/ZIP		
Chicago, Illinois 60601-3218		
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS)	TELEPHONE NUMBER	
6283811	312-814-3565	
<p>ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>		
<p>ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>		
<p>ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>		
<p>IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>		
<p>IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS.</p>		
RETAINED COUNSEL <input type="checkbox"/>	APPOINTED COUNSEL <input type="checkbox"/>	

CERTIFICATE OF SERVICE

I hereby certify that on April 17, 2008, I submitted my **Appearance** for electronic filing and uploading to the CM/ECF system. A copy of this document was e-mailed to the following CM/ECF user:

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